Madame Chair,

My name is Tim Malchow, EMS Chief for the City of Cannon Falls. We are against HF 2736 for many reasons. We feel this bill has been drafted to handle Metro issues and not rural Minnesota. With the current PSA laws, every Minnesotan and visitor has access to an ambulance service. With the proposed changes locally, many township residents within Goodhue County will lose their ambulance coverage since one agency will not apply for permits to operate an ambulance in the townships. Their reason is funding. The townships are not funding an ambulance service and this bill would allow them to abandon their current area and focus on serving ONLY their City. Currently, the townships get an ambulance within 6-10 minutes of a page. After this bill their residents will see an increased response time of 23-28 minutes if the next closest ambulance service is permitted. Here is a map of the ambulance services within Goodhue County and everything in red will probably require another ambulance service to pick up that service area.

The map also shows that many townships are split with two ambulance services covering the township allowing for the closest ambulance to respond. If the bill is passed, the township will have to choose one ambulance service and the person on the opposite site of the township will have a long response since the ambulance is coming from the opposite side of the township.

With funding on a decline in EMS. Many ambulance services are operating with the hope of breaking-even at the end of the year but many operate at a loss. The Republican Eagle reported on February 1, 2022, that an ambulance service in our county lost 1.1 million dollars providing EMS within their PSA. Now, with HF 2736 ambulance services may have to pay permit fees in a business that is already losing money.

It is not about ambulance monopolies within Minnesota but funding and providing a service that our residents and visitors deserve. Funding is key in providing the service and the legislature should be looking how to provide necessary funding for ambulances to operate and increasing reimbursements for services that are provided by the ambulance.

The performance standards should not be within this bill. Any standards that are adopted should be based on patient care and help drive better patient outcomes. There are plenty of studies showing the use of lights and sirens do not improve patient outcomes. This is one example of a standard that does not belong in this bill. Most ambulance services do not have any control of the dispatch centers and will now be penalized in response times if this is bill is passed. Reporting these standards to every permitted area would take a lot of staff time and the majority of rural services do not have the staff or funding to make this reporting requirement work in a timely fashion.

The EMS regulatory board (EMSRB) is a very robust board and is not the same as noted by the OLA. I would suggest giving the power to the EMSRB and having them be able to change PSA areas where there is a correction needed. The EMSRB could have a PSA committee or workgroup to make recommendations on PSA changes. These groups would consult the local jurisdictions and seek their input.

I want to ensure the people of Minnesota and visitors have access to an ambulance service when they experience an emergency. This bill would jeopardize ambulance response and that is why I am against it.

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